



#22/N
4-22-03
B.H. Hild

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

5 In re application of:

Smith, Jeffrey A. et al.

Application No: 09/240, 844

10

Filed: February 1, 1999

For: USER INTERFACE METHOD AND
SYSTEM FOR APPLICATION
15 PROGRAMS IMPLEMENTED WITH
COMPONENT ARCHITECTURES

) Docket No: ROXIP259

) Group Art Unit: 2173

) Examiner: Vu, Kieu D.

) Date: April 10, 2003

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APR 21 2003

Technology Center 2100

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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail to: Commissioner of Patents and Trademarks, Washington, DC 20231 on April 10, 2003.

25

Signed: _____

Weely Weld

REQUEST FOR RECONSIDERATION

30

Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

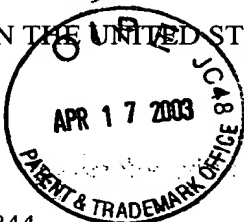
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This Request for Reconsideration is in response to the Final Office Action dated February 10, 2003. The due date for response extends to May 10, 2003. However, this Request for Reconsideration is provided within the two month period extending to April 10, 2003. Please enter the following remarks.

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Not entered KV 05/02/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re application of:

SMITH et al.

Application No: 09/240,844

Filed: February 1, 1999

For: USER INTERFACE METHOD AND SYSTEM
FOR APPLICATION PROGRAMS IMPLEMENTED
WITH COMPONENT ARCHITECTURES

Attorney Docket No: ROXIP259

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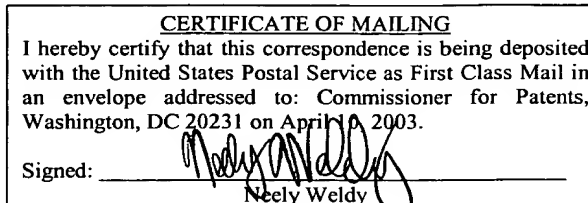
APR 21 2003

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☐ Duplicate for
fee processing

Commissioner for Patents
Washington, DC 20231

Sir:



Transmitted herewith is a Request for Reconsideration in the above-identified application.

The fee has been calculated as shown below.

Claims

	Remaining After <u>Amendment</u>	Highest Previously <u>Paid For</u>	Present <u>Extra</u>	SMALL ENTITY <u>RATE FEE</u>	OR	LARGE ENTITY <u>RATE FEE</u>
TOTAL CLAIMS	34 -	34	0	X09 = \$	OR	X18 = \$
INDEP CLAIMS	04 -	04	0	X42 = \$	OR	X84 = \$
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$140		\$280
TOTAL				\$_____		\$_____

- ☐ Applicant hereby petition for a _____ month extension of time to respond to the outstanding Office Action.
- ☒ Applicant believes that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant hereby petitions that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0805
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fees.
- ☒ If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-0805 (Order No. ROXIP259). A copy of this sheet is enclosed.

Respectfully submitted,
MARTINE & PENILLA, LLP

Kenneth D. Wright
Registration No. 53,795

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Customer Number 25920